



EMPLOYEE FILE CHECKLIST

Employee Name: _____

Employment Date: _____

<input type="checkbox"/> Employment Application <input type="checkbox"/> Education Proof <input type="checkbox"/> Affidavit of Good Moral Character <input type="checkbox"/> Acknowledgement Form (Annual) <input type="checkbox"/> Training Transcript including Staff Credential Verification	All on file prior to employment
<input type="checkbox"/> Local Criminal Records Result <input type="checkbox"/> Final DCF Fingerprint Screening Result <input type="checkbox"/> Employment History Check (5 year)	All on file prior to employment
<input type="checkbox"/> Fire Extinguisher Training <input type="checkbox"/> Start 40 Hour Training <input type="checkbox"/> Completed 40 Hour Training	Within 2 weeks of hire Within 90 days of Employment Within 15 months in Child Care Industry
<input type="checkbox"/> Literacy Training	Completed within one (1) year of employment
<input type="checkbox"/> Approved Infant Training (if applicable)	Completed within 90 days of employment if caring for infants.
<input type="checkbox"/> First Aid Certificate <input type="checkbox"/> Infant/Child CPR Certificate <input type="checkbox"/> Annual Physical for Vehicle Driver <input type="checkbox"/> Current Driver's License	When applicable
<input type="checkbox"/> 5 Year Local Criminal Records Check <input type="checkbox"/> 5 Year Fingerprint Results	5 years from original date